

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the linesSEIU COPE (Service Employees International Union Committee On Political Education-
n)

ADDRESS (number and street)

1800 Massachusetts Ave NW

☐Check if different
than previously
reported. (ACC)

Washington

DC

20036

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00004036

3. IS THIS
REPORT☐NEW
(N)**OR**☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

01

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Anna Burger

Signature of Treasurer

Electronically Filed by Anna Burger

Date

09

24

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XA**

Transaction ID :

This amendment is made to include this note about the amended February Report (1/1/09 - 1/31/09) filed 9/20/09; no other transactions or balances are changed by this amendment. The amended report filed on 9/20/09 shows cash on hand January 1, 2009 of \$1,978,645.00. This amount is \$27,070.58 less than the ending cash balance as of December 31, 2008 shown on the Amended January (YE) Report (11/25/08 - 12/31/08) filed 8/24/09. The cash balance reported on the amended February Report matches the Committee's reconciled December 31, 2008 bank statements including all known outstanding checks already reported as expenses but not yet cashed.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 36

Write or Type Committee Name

SEIU COPE (Service Employees International Union Committee On Political Education)

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 0 9

To:

M M
0 1D D
3 1Y Y Y Y
2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		1978645.00
(b) Cash on Hand at Beginning of Reporting Period	1978645.00	
(c) Total Receipts (from Line 19)	1003293.27	1003293.27
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2981938.27	2981938.27
7. Total Disbursements (from Line 31)	120188.16	120188.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2861750.11	2861750.11
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	44704.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

SEIU COPE (Service Employees International Union Committee On Political Education)

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	992438.02	992438.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	992438.02	992438.02
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	992438.02	992438.02
12. Transfers From Affiliated/Other Party Committees	4522.77	4522.77
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1332.48	1332.48
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1003293.27	1003293.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1003293.27	1003293.27

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	39885.40	39885.40	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	39885.40	39885.40	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	30000.00	
24. Independent Expenditure (use Schedule E)	50302.76	50302.76	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	120188.16	120188.16	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120188.16	120188.16	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	992438.02	992438.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	992438.02	992438.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	39885.40	39885.40
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	39885.40	39885.40

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 36

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A.

Full Name (Last, First, Middle Initial)

NEW YORK STATE PUBLIC EMPLOYEES FEDERATION-COPE

Mailing Address P O Box 12414

City

Albany

State

NY

Zip Code

12212

FEC ID number of contributing
federal political committee.**C**

C00148098

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4522.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	0	9

Transaction ID: C98392

Amount of Each Receipt this Period

4522.77

SUBTOTAL of Receipts This Page (optional)

4522.77

TOTAL This Period (last page this line number only)

4522.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A.

Full Name (Last, First, Middle Initial)

OHIO DEMOCRATIC PARTY

Mailing Address 340 East Fulton Street

City

Columbus

State

OH

Zip Code

43215

FEC ID number of contributing
federal political committee.

C

C00016899

Name of Employer

Occupation

Receipt For:

☐ ☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 3 / 2 0 0 9

Transaction ID: C98388

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 36

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A.

Full Name (Last, First, Middle Initial)

Amalgamated Bank, N. A.

Mailing Address 1825 K Street NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1062.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: C98384

Amount of Each Receipt this Period

950.42

B.

Full Name (Last, First, Middle Initial)

Amalgamated Bank, N. A.

Mailing Address 1825 K Street NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1062.72

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: C98385

Amount of Each Receipt this Period

112.30

C.

Full Name (Last, First, Middle Initial)

Bank of America, N. A.

Mailing Address P O Box 830175

City

Dallas

State

TX

Zip Code

75283

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.76

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 1 / 2 0 0 9

Transaction ID: C98389

Amount of Each Receipt this Period

269.76

SUBTOTAL of Receipts This Page (optional)

1332.48

TOTAL This Period (last page this line number only)

1332.48

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) Amalgamated Bank, N. A.	Transaction ID: D14646 Date of Disbursement																				
Mailing Address 1825 K Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	0		2	0	0	9												
City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period																				
Purpose of Disbursement bank service fees Candidate Name	<table border="1"> <tr> <td colspan="10">97.31</td> </tr> </table>	97.31																			
97.31																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Amalgamated Bank, N. A.	Transaction ID: D14647 Date of Disbursement																				
Mailing Address 1825 K Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	0		2	0	0	9												
City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period																				
Purpose of Disbursement bank edi fees Candidate Name	<table border="1"> <tr> <td colspan="10">63.60</td> </tr> </table>	63.60																			
63.60																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Amalgamated Bank, N. A.	Transaction ID: D14649 Date of Disbursement																				
Mailing Address 1825 K Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		3	0		2	0	0	9												
City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period																				
Purpose of Disbursement bank merchant fees Candidate Name	<table border="1"> <tr> <td colspan="10">15.00</td> </tr> </table>	15.00																			
15.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

175.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) Chase Paymentech Mailing Address PO Box 6600	Transaction ID: D14648 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 0 / 2 0 0 9</div> </div>
City Hagerstown State MD Zip Code 21741 Purpose of Disbursement merchant fees Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>30.14</div>
B. Full Name (Last, First, Middle Initial) Grassroots Solutions, Inc. Mailing Address 2929 University Avenue SE City Minneapolis State MN Zip Code 55414 Purpose of Disbursement consulting expenses Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: D14655 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 6 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>40.82</div>
C. Full Name (Last, First, Middle Initial) Greenberg Quinlin Rosner Research Inc Mailing Address 10 G St NE ste 400 City Washington State DC Zip Code 20002 Purpose of Disbursement research Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: D14658 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 2 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>36000.00</div>

SUBTOTAL of Disbursements This Page (optional)

36070.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) M.K. Catering	Transaction ID: D14661 Date of Disbursement																				
Mailing Address 5724 Lafayette Place	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	9		2	0	0	9												
City Hyattsville State MD Zip Code 20781	Amount of Each Disbursement this Period																				
Purpose of Disbursement fundraising expense Candidate Name	<table border="1"> <tr> <td colspan="10">3445.50</td> </tr> </table>	3445.50																			
3445.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) SEIU (General Fund)	Transaction ID: D179673 Date of Disbursement																				
Mailing Address 1800 Massachusetts Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	0	9												
City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period																				
Purpose of Disbursement use of advance Candidate Name	<table border="1"> <tr> <td colspan="10">-1309.80</td> </tr> </table>	-1309.80																			
-1309.80																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) SEIU (General Fund)	Transaction ID: D181034 Date of Disbursement																				
Mailing Address 1800 Massachusetts Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	0	9												
City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period																				
Purpose of Disbursement return funds deposited in error. receipt included in jan 2009 unitemized Candidate Name	<table border="1"> <tr> <td colspan="10">1502.83</td> </tr> </table>	1502.83																			
1502.83																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3638.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A.

Full Name (Last, First, Middle Initial)

SEIU-CC, LLC

Mailing Address 330 West 42nd Street

City
New York

State
NY

Zip Code
10036

Purpose of Disbursement
void ck #2578 reported 10/10/08

Candidate Name

004

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D181030

Date of Disbursement

01 / 13 / 2009

Amount of Each Disbursement this Period

-36915.39

B.

Full Name (Last, First, Middle Initial)

SEIU-CC, LLC

Mailing Address 330 West 42nd Street

City
New York

State
NY

Zip Code
10036

Purpose of Disbursement
replace void ck#2578 survey research, not for specific IE

Candidate Name

005

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D181032

Date of Disbursement

01 / 21 / 2009

Amount of Each Disbursement this Period

36915.39

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

39885.40

B. Form/Schedule : **SB21B**
Transaction ID : **D181032**

ck 2578 reported 10/10/08 was lost and voided and replaced by this ck during january 2009

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	Transaction ID: D14650 Date of Disbursement
Mailing Address 430 South Capitol Street SE 2nd Floor	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 7 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement contribution	<div>15000.00</div>
Candidate Name DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) HILL PAC	Transaction ID: D14651 Date of Disbursement
Mailing Address 1717 K Street N.W. Suite 309B	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 2 / 2 0 0 9</div> </div>
City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>5000.00</div>
Candidate Name HILL PAC	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Perriello Protects the vote Fund	Transaction ID: D14652 Date of Disbursement
Mailing Address PO BOX 306	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 2 / 2 0 0 9</div> </div>
City IVY State VA Zip Code 22945	Amount of Each Disbursement this Period
Purpose of Disbursement recount fund contribution	<div>5000.00</div>
Candidate Name Thomas Perriello	<div>011</div> Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount

SUBTOTAL of Disbursements This Page (optional)

25000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

REPUBLICAN MAIN STREET PARTNERSHIP POLITICAL ACTION COMMITTEE

Mailing Address 2201 WISCONSIN AVENUE NW SUITE 320

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
contribution (corrected amount)

Candidate Name

REPUBLICAN MAIN STREET PARTNERSHIP POLITICAL ACTION COMMITTEE

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D14653

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

30000.00

A. Form/Schedule : **SB23**
Transaction ID : **D14653**

original report listed \$50,000 which was incorrect. Amended report reflects correct amount of \$5,000

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) SEIU Phone LLC	Transaction ID: D14621 Date of Disbursement																				
Mailing Address 1395 Dublin Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	9												
City Columbus State OH Zip Code 43215	Amount of Each Disbursement this Period																				
Purpose of Disbursement eliminate obligation - expenditure not done	<table border="1"> <tr> <td>1280.66</td> </tr> </table>	1280.66																			
1280.66																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) SEIU Phone LLC	Transaction ID: D179310 Date of Disbursement																				
Mailing Address 1395 Dublin Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	9												
City Columbus State OH Zip Code 43215	Amount of Each Disbursement this Period																				
Purpose of Disbursement eliminate obligation as paid	<table border="1"> <tr> <td>1280.66</td> </tr> </table>	1280.66																			
1280.66																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) SEIU Phone LLC	Transaction ID: D177438 Date of Disbursement																				
Mailing Address 1395 Dublin Rd	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	9												
City Columbus State OH Zip Code 43215	Amount of Each Disbursement this Period																				
Purpose of Disbursement eliminate obligation established 10/16	<table border="1"> <tr> <td>8000.00</td> </tr> </table>	8000.00																			
8000.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB29**
Transaction ID : **D14621**

part of obligation established 10/16 was for IE never executed. This eliminates that part of the original obligation

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A.

Full Name (Last, First, Middle Initial)

SEIU United Healthcare Workers West

Mailing Address 560 Thomas L Berkley Way

City State Zip Code
Oakland CA 94612

Purpose of Disbursement
final balance of estimated obligation first reported 10/24

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D178503

Date of Disbursement

MM / DD / YYYY
01 / 13 / 2009

Amount of Each Disbursement this Period

52948.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SEIU-CC, LLC

Mailing Address 330 West 42nd Street

City State Zip Code
New York NY 10036

Purpose of Disbursement
eliminate obligation established 11/24

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D179544

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2009

Amount of Each Disbursement this Period

1309.80

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

0.00

A. Form/Schedule : **SB29**

final payment for activity first reported 10/24 but total was less than the original estimate

Transaction ID : **D178503**

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 / 36

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Linemark PrintingNature of Debt (Purpose):
obligation for IE printing

Mailing Address 1220 Caraway Court Suite 1040

City State ZIP Code
Largo MD 20774

Outstanding Balance Beginning This Period

1231.52

Transaction ID: D13122

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1231.52

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Local 615Nature of Debt (Purpose):
establish obligation

Mailing Address 26 West Street 3rd Flr

City State ZIP Code
Boston MA 02111

Outstanding Balance Beginning This Period

1500.00

Transaction ID: D14238

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Next Big ThingNature of Debt (Purpose):
establish obligation

Mailing Address 23 North King Street

City State ZIP Code
Leesburg VA 20176

Outstanding Balance Beginning This Period

15000.00

Transaction ID: D14247

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

1) SUBTOTALS This Period This Page (optional).....

17731.52

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 / 36

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SEIU Phone LLCNature of Debt (Purpose):
establish obligation

Mailing Address 1395 Dublin Rd

City State ZIP Code
Columbus OH 43215

Outstanding Balance Beginning This Period

1280.66

Transaction ID: D14254

Amount Incurred This Period

0.00

Payment This Period

1280.66

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SEIU Phone LLCNature of Debt (Purpose):
establish obligation

Mailing Address 1395 Dublin Rd

City State ZIP Code
Columbus OH 43215

Outstanding Balance Beginning This Period

9280.66

Transaction ID: D177436

Amount Incurred This Period

0.00

Payment This Period

9280.66

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SEIU United Healthcare Workers WestNature of Debt (Purpose):
establish obligation for
10/25 estimate not yet paid

Mailing Address 560 Thomas L Berkley Way

City State ZIP Code
Oakland CA 94612

Outstanding Balance Beginning This Period

52948.53

Transaction ID: D178501

Amount Incurred This Period

0.00

Payment This Period

52948.53

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

0.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

C. Form/Schedule : **SD10**
Transaction ID : **D178501**

balance of original \$250,000 estimate from 10/25 24hr notice not yet paid by the two partial payments reported 11/12 and 11/24

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 25 / 36

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education-
n)**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
SEIU-CC, LLCNature of Debt (Purpose):
establish obligation

Mailing Address 330 West 42nd Street

City State ZIP Code
New York NY 10036

Outstanding Balance Beginning This Period

15000.00

Transaction ID: D14276

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SEIU-CC, LLCNature of Debt (Purpose):
establish obligation

Mailing Address 330 West 42nd Street

City State ZIP Code
New York NY 10036

Outstanding Balance Beginning This Period

1939.12

Transaction ID: D14277

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1939.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SEIU-CC, LLCNature of Debt (Purpose):
establish obligation for
unpaid portion of IE's re-
ported this period

Mailing Address 330 West 42nd Street

City State ZIP Code
New York NY 10036

Outstanding Balance Beginning This Period

11343.16

Transaction ID: D179402

Amount Incurred This Period

0.00

Payment This Period

1309.80

Outstanding Balance at Close of This Period

10033.36

1) SUBTOTALS This Period This Page (optional).....

26972.48

2) TOTALS This Period (last page this line number only).....

44704.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

44704.00

B. Form/Schedule : **SD10**
Transaction ID : **D14277**

previous Form3x included obligation of \$1,257 that was thought to be owed this vendor but later determined that work was performed and paid to other vendor

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 27 / 36

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) SEIU COPE (Service Employees International Union Committee On Political Education)		FEC IDENTIFICATION NUMBER C C00004036	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee SEIU-CC, LLC		Date MM / DD / YYYY 01 / 09 / 2009	
Mailing Address 330 West 42nd Street		Amount 21558.20	
City State Zip Code New York NY 10036		Transaction ID: D14659	
Purpose of Expenditure phonebanking		Office Sought: <input checked="" type="checkbox"/> House State: GA <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> Presidential	
Category/Type 007		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: James Martin		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : 2008	
Calendar Year-To-Date Per Election for Office Sought 21558.20			
Full Name (Last, First, Middle, Initial) of Payee SEIU-CC, LLC		Date MM / DD / YYYY 01 / 16 / 2009	
Mailing Address 330 West 42nd Street		Amount 1404.68	
City State Zip Code New York NY 10036		Transaction ID: D14660	
Purpose of Expenditure phonebanking previously reported as memo item		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential	
Category/Type 007		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2008	
Calendar Year-To-Date Per Election for Office Sought 23182.28			
(a) SUBTOTAL of Itemized Independent Expenditures		22962.88	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Anna Burger Signature		Date MM / DD / YYYY 11 / 20 / 2008	

A.

Form/Schedule : **SE**

Transaction ID : **D14659**

additional expenses for ie originally reported on 11/20 24hr notice with estiamte of \$50,000

B.

Form/Schedule : **SE**

Transaction ID : **D14660**

originally reported on 24 hr notice dated 10/30 for estimated amount of \$1404.16

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) SEIU COPE (Service Employees International Union Committee On Political Education)		FEC IDENTIFICATION NUMBER C C00004036	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee SEIU United Healthcare W		Date MM / DD / YYYY 01 / 13 / 2009	
Mailing Address 560 Thomas L Berkley Way		Amount 16105.30	
City State Zip Code Oakland CA 94612		Transaction ID: D14654	
Purpose of Expenditure canvass staff & expense for activity previously reported as item		Office Sought: <input type="checkbox"/> House State: DC <input checked="" type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential	
Category/Type 007		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 23182.28		2008	
Full Name (Last, First, Middle, Initial) of Payee SEIU Phone LLC		Date MM / DD / YYYY 01 / 29 / 2009	
Mailing Address 1395 Dublin Rd		Amount 3337.50	
City State Zip Code Columbus OH 43215		Transaction ID: D14656	
Purpose of Expenditure phonebanking previously reported as item		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type 007		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Steve Driehaus		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 5562.28		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		19442.80	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Anna Burger Signature		Date MM / DD / YYYY 10 / 16 / 2008	

A. Form/Schedule : **SE**
Transaction ID : **D14654**

additional expenses for IE originally reported 10/16/08

B. Form/Schedule : **SE**
Transaction ID : **D14656**

previously reported as \$4,000 memo item and included on 24hr notice filed 10/17

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) SEIU COPE (Service Employees International Union Committee On Political Education)		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00004036 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee SEIU Phone LLC		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 01</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2009</div> </div>	
Mailing Address 1395 Dublin Rd		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3337.50</div>	
City State Zip Code Columbus OH 43215		Transaction ID: D14657	
Purpose of Expenditure phonebanking previously reported as a me- (no item)		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">007</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">23182.28</div>	

Full Name (Last, First, Middle, Initial) of Payee AP/Wide World Photos		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 01</div> <div style="border: 1px solid black; padding: 2px;">D 27</div> <div style="border: 1px solid black; padding: 2px;">Y 2009</div> </div>	
Mailing Address box 414262		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">400.00</div>	
City State Zip Code Boston MA 02241		Transaction ID: D14662	
Purpose of Expenditure photographs		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">23182.28</div>	

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">3737.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
(c) TOTAL Independent Expenditures	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Anna Burger

 Signature

Date

M
10

D
17

Y
2008

A. Form/Schedule : **SE** previously reported as \$4,000 memo item and 24hr notice filed 10/17
Transaction ID : **D14657**

B. Form/Schedule : **SE** additional expense for IE reported 10/28
Transaction ID : **D14662**

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) SEIU COPE (Service Employees International Union Committee On Political Education)		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;">C C00004036</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee SEIU-CC, LLC		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 01</div> <div style="border: 1px solid black; padding: 2px;">D 08</div> <div style="border: 1px solid black; padding: 2px;">Y 2009</div> </div>	
Mailing Address 330 West 42nd Street		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1309.80</div>	
City State Zip Code New York NY 10036		Transaction ID: D179552	
Purpose of Expenditure phone banking previously reported as memo item		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">007</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">23182.28</div>		2008	
Full Name (Last, First, Middle, Initial) of Payee SEIU Phone LLC		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 01</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2009</div> </div>	
Mailing Address 1395 Dublin Rd		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">944.12</div>	
City State Zip Code Columbus OH 43215		Transaction ID: D177437	
Purpose of Expenditure phone banking previously reported as memo item		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;"></div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">5562.28</div>		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;">2253.92</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Anna Burger Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 21</div> <div style="border: 1px solid black; padding: 2px;">Y 2008</div> </div>	

A.

Form/Schedule : **SE**

Transaction ID : **D179552**

partial payment on program originally reported on 10/21 24hr notice with \$4,000 estimate

B.

Form/Schedule : **SE**

Transaction ID : **D177437**

previously reported as a memo item and included on 48hr notice filed 10/8 but listed as SEIU Local 1199 WV/KY/OH as vendor

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) SEIU COPE (Service Employees International Union Committee On Political Education)		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00004036 </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee SEIU Phone LLC		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 01</div> <div style="border: 1px solid black; padding: 2px;">D 29</div> <div style="border: 1px solid black; padding: 2px;">Y 2009</div> </div>	
Mailing Address 1395 Dublin Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1280.66</div>	
City State Zip Code Columbus OH 43215		Transaction ID: D177452	
Purpose of Expenditure phonebanking previously reported as memo item		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Steve Chabot		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">5562.28</div>		2008	
Full Name (Last, First, Middle, Initial) of Payee BLT & Associates		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 01</div> <div style="border: 1px solid black; padding: 2px;">D 27</div> <div style="border: 1px solid black; padding: 2px;">Y 2009</div> </div>	
Mailing Address 6430 Sunset Blvd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">625.00</div>	
City State Zip Code Los Angeles CA 90028		Transaction ID: D14663	
Purpose of Expenditure graphic design		Office Sought: <input type="checkbox"/> House State: DC <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> Presidential	
Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Barack Obama		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">23182.28</div>		2008	
(a) SUBTOTAL of Itemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1905.66</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures		<div style="border: 1px solid black; padding: 2px; display: inline-block;">50302.76</div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Anna Burger Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 09</div> <div style="border: 1px solid black; padding: 2px;">D 24</div> <div style="border: 1px solid black; padding: 2px;">Y 2009</div> </div>	

A. Form/Schedule : **SE**
Transaction ID : **D177452**

previously reported as a memo item and included on 48hr notice filed 10/8 but listed as SEIU Local 1199 WV/KY/OH as vendor

B. Form/Schedule : **SE**
Transaction ID : **D14663**

additional expense for IE reported 10/16/08